COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(Includes Reference to PCT International Applications)

ATTORNEY DOCKET NUMBER 30488-1016

As a below named inventor, I (we) hereby declare that: My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: SHOCK-RESISTANT & ENVIRONMENTALLY SEALED CONTAINER the specification of which (check only one item below): is attached hereto. was filed as United States application Serial No. on and was amended ____(if applicable) m was filed as PCT international application Number _____

Thereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

_____ (if applicable)

Tacknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 or §356 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America, listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

and was amended under PCT Article 19

COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119	
			☐ YES	□ NO
			☐ YES	□ NO
			YES	□ NO
			☐ YES	□ NO
			☐ YES	□ NO
			☐ YES	□ NO

Combined Declaration For Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)

ATTORNEY DOCKET NUMBER 30488-1016

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

	ned in Title 37, Code of this application	of Federal Regulations §1.56 which became ava	inable between the filing date of the p	этют аррисацоп(s) ан	u the hadonal of	re i international	
PRI	OR U.S. APPLICAT	TIONS OR PCT INTERNATIONAL APPLIC	CATIONS DESIGNATING THE U.	S. FOR BENEFIT U	INDER 35 U.S.C	C. 120:	
		U.S. APPLICATIONS		ST	STATUS (Check one)		
	U.S. APPLICATION NUM	IBER U.S. FILI	U.S. FILING DATE		PENDING	ABANDONED	
			37				
		PCT APPLICATIONS DESIGNATING TH	IE U.S.				
PCT APPLICATION NO.		O. PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)				
-busi	ness in the Patent FOINETTE F. KONS	EY: As a named inventor, I hereby appoint and Trademark Office connected therewing KI, Reg. No. 34,202, JOHN G. FLAIM, Reg. which has an office address at 101 West Broadw	th: MITCHELL P. BROOK, Reg. No. 37,323, and PETER R. MARTI	. No. 32,967, DAVI	D I. ROCHE, I	Reg. No. 30,767,	
Send Correspondence to: Mitchell P. Brook, Esq. BAKER & McKENZIE 101 West Broadway, 12th Floor					Direct Telephone Calls to: (name and telephone number)		
				'	•	<i>,</i>	
101 West Broadway, 12th Floor					P. Brook 6-1441		
			`	(619) 236-1441 SECOND GIVEN NAME			
	INVENTOR	ARNETT	Jeffery		D.		
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2	FULL NAME OF INVENTOR	FAMILY NAME THOMAS	FIRST GIVEN NAME Matthew	SECOND G	IVEN NAME		
0 2							
2	RESIDENCE & CITIZENSHIP	La Mesa	STATE OR FOREIGN COUNTRY California COUNTRY OF CITIZEN USA		OF CHIZENSHIP		
i	BOST OFFICE	POST OFFICE ADDRESS			STATE & ZIP CODE/COUNTRY		
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	Additional inventors a	are being named on the 1 supplemental Addition	nal Inventor(s) sheets(s) attached here	to.			
I he	reby declare that all s	statements made herein of my own knowledge nts were made with the knowledge that willful	are true and that all statements made	e on information and	belief are believe	ed to be true; and	
sect	ion 1001 of Title 18 o	f the United States Code, and that such willful f	alse statements may jeopardize the va	lidity of the application	on or any patent is	ssuing thereon.	
SIG	ALL OF INVENTOR	Driver	SIGNATURE OF INVENTOR 2	h mas	-		

DATE

10/10/00



Additional Inventors



ATTORNEY DOCKET NUMBER Combined Declaration For Patent Application and Power of Attorney (Continued) 30488-1016 (Includes Reference to PCT International Applications) FULL NAME OF FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME 2 INVENTOR 0 UKE Alan 3 STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITY RESIDENCE & Del Mar California USA CITIZENSHIP POST OFFICE ADDRESS STATE & ZIP CODE/COUNTRY CITY POST OFFICE 355 14th Street Del Mar California 92014 USA ADDRESS FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME **FULL NAME OF** 2 INVENTOR 0 CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP 4 RESIDENCE & CITIZENSHIP POST OFFICE ADDRESS STATE & ZIP CODE/COUNTRY POST OFFICE ADDRESS FAMILY NAME FIRST GIVEN NAME SECOND GIVEN NAME FULL NAME OF INVENTOR CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP RESIDENCE & CITIZENSHIP POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY POST OFFICE ADDRESS FIRST GIVEN NAME SECOND GIVEN NAME FAMILY NAME FULL NAME OF INVENTOR CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP RESIDENCE & CITIZENSHIP POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY POST OFFICE ADDRESS I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon. SIGNATURE OF INVENTOR 203 SIGNATURE OF INVENTOR 204 DATE SIGNATURE OF INVENTOR 205 SIGNATURE OF INVENTOR 206

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